PAPER ENTRY FORMS DO NOT RECEIVE EMAIL CONFIRMATIONS				
CREATIVE JUICES 5K Official Entry Form May 25, 2015		Official Us	Official Use Only	
First Name	Last Name	Age on Race Day	Sex	
Street Address City	State	Apt. #	Entry Fee: \$20 if received by 5/1	
	Address		\$25 if received by 5/22 \$30 day of	
Phone Number Make Check Payable to: Creative Juices, Mail to: 1107 Griffin Road, Leesburg, FL 34748				
WAIVER OF LIABILITY ACKNOWLEDEMENT: I am voluntarily entering or agreeing to be a volunteer in this event. I understand that my participation in this event is physically demanding and can be a potentially hazardous activity, which could cause injury or death. I agree to not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform, am in good health, and am properly trained. I assume all risks associated with my participants, the effects of the weather, including high heat and /or humidity, traffic on the course and the conditions of the course, all such risks being known and appreciated by me. I understand that bicycles, skateboards, roller skates or blades, animals and radio headsets are not allowed in this event. I also understand that I must return the timing transponder issued to me for this event, if requested or I will be billed \$30.00 as replacement cost. I also understand that if I cannot participate in this event, is enjury, family emergency, etc., that I will not receive a refund. AUTHORIZATION: I agree to abide by any decision of event's offaints and that my entry fee will not be refunded. I understand that if I cannot participate in this event, ic injury, family emergency, etc., that I will not receive a refund. AUTHORIZATION: I agree to abide by any decision of event's offaints on any reason whatsoever. I grant permission for event's organizers to take pictures to take be pictures to take a picture of may reason whatsoever. I grant permission for event's organizers to use my benefit of the event and agree for this event to use any photoso of me that may be taken during my participation in this event, and the results of this event. I also grant permission for event's organizers to use my email address to communicate with me concerning other upcoming events and specifically, instructions for this event. I will abide by these guidelines. GUARDIAN'S PERMISSION AND RE-LEASE FOR MINOR: If I am or will be applying for my chil				
Please sign here. (Parent must sign if participant i	s under 18 years of age)	Date Signed		